

GENERAL: Use this form to order audio or transcript of proceedings. Complete a separate order form for each case number and/or date. Audio will be produced on a CD. Audio cost is \$31 per (day/tape). Payment and delivery of transcript is between the ordering party and the assigned transcriber. **Payment for audio CD must be received in advance before CD is produced.**

SUBMIT ORDER FORM:

Dallas & Wichita Falls: dal_transcript@txnb.uscourts.gov

Fort Worth: ftw_transcript@txnb.uscourts.gov

West Texas: lub_transcript@txnb.uscourts.gov

ITEM 1: Specifies whether the order is for a copy of the audio from the proceeding or an official order of the transcript. Denote order with an “X” in the correct field.

ITEMS 2-13: These items should always be complete. Only one case number, case name, and date of proceeding may be listed per order.

ITEM 14: Specifies the type of case. Denote order with an “X” in the correct field.

ITEM 15:

Ordinary (\$3.65 per page)	A transcript to be delivered within thirty (30) calendar days after the receipt of an order request.
Expedited – 14 Day (\$4.25 per page)	A transcript to be delivered within fourteen (14) calendar days after receipt of an order request.
Expedited – 7 Day (\$4.85 per page)	A transcript to be delivered within seven (7) calendar days after receipt of an order request.
Expedited – 3 Day (\$5.45 per page)	A transcript to be delivered within three (3) calendar days after receipt of an order request.
Daily (\$6.05 per page)	A transcript to be delivered following the adjournment and prior to the normal opening hour of the court on the following day whether or not it actually is a court day.
Hourly (\$7.25 per page)	A transcript of proceedings ordered under unusual circumstances to be delivered within two (2) hours of receiving an order request.

ITEM 16: Place an “X” in the correct field for each portion requested. Be sure that the description is accurately and clearly written to facilitate processing. For example, list full names of witness testimony to be included.

ITEM 17-18: Sign and date in this space to certify that you will pay all charges for the order.

Shaded area reserved for the court’s use.

AUDIO / TRANSCRIPT ORDER

1. ORDER REQUEST: <input type="checkbox"/> DUPLICATE OF AUDIO CD Recordings Only		<input checked="" type="checkbox"/> TRANSCRIPT		2. DATE OF ORDER: 9/23/19		FOR COURT USE ONLY DUE DATE:																	
3. NAME: James P. Moon				4. PHONE NUMBER: 469-831-3004		5. EMAIL ADDRESS: jpmp11c@gmail.com																	
6. MAILING ADDRESS: P.O. Box 2206				7. CITY: Red Oak		8. STATE: TX	9. ZIP CODE: 75154																
10. CASE NUMBER: 18-31575-BJH-11		11. CASE NAME: Hard-Mire Restaurant Holdings, LLC		12. JUDICIAL OFFICIAL: Jernigan		13. DATE OF PROCEEDING: FROM: 06 / 12 / 2019																	
14. ORDER FOR:		<input checked="" type="checkbox"/> APPEAL		<input type="checkbox"/> BANKRUPTCY		<input type="checkbox"/> OTHER																	
15. ORDER: <table style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;">ORDINARY</td> <td style="width: 25%;">7 DAY EXPEDITED</td> <td style="width: 25%;">DAILY</td> <td style="width: 25%;">HOURLY</td> </tr> <tr> <td>A. <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td>14 DAY EXPEDITED</td> <td>3 DAY EXPEDITED</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> </table>								ORDINARY	7 DAY EXPEDITED	DAILY	HOURLY	A. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		14 DAY EXPEDITED	3 DAY EXPEDITED			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
ORDINARY	7 DAY EXPEDITED	DAILY	HOURLY																				
A. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																				
	14 DAY EXPEDITED	3 DAY EXPEDITED																					
	<input checked="" type="checkbox"/>	<input type="checkbox"/>																					
16. AUDIO/TRANSCRIPT REQUESTED Specify portion(s) and date(s) of proceeding(s):																							
PORTION(S)				PORTION(S)																			
<input checked="" type="checkbox"/> ENTIRE HEARING 6/12/19 - Hearing on Objection (DN 57) to Claim No. 7 (Zidell)				<input type="checkbox"/> TESTIMONY (SPECIFY WITNESS)																			
<input type="checkbox"/> OPENING STATEMENT (PLAINTIFF)				<input type="checkbox"/> VOIR DIRE																			
<input type="checkbox"/> OPENING STATEMENT (DEFENDANT)				<input type="checkbox"/> OTHER (SPECIFY)																			
<input type="checkbox"/> CLOSING ARGUMENT (PLAINTIFF)				<input type="checkbox"/> COURT RULING ONLY																			
<input type="checkbox"/> CLOSING ARGUMENT (DEFENDANT)				<input type="checkbox"/>																			
<input type="checkbox"/>				<input type="checkbox"/>																			
CERTIFICATION By signing 17. & 18, I certify that I will pay all charges (deposit plus additional as specified by the assigned transcriber).				17. SIGNATURE:																			
18. DATE: 9/23/19				18. DATE: 9/23/19																			
COURT USE ONLY																							
A. PROCESSED BY:				B. TRANSCRIPT TO BE PREPARED BY:																			
PHONE NUMBER:				ADDRESS:																			
EMAIL ADDRESS:				TELEPHONE: EMAIL ADDRESS:																			
C. PARTY RECEIVED AUDIO:		DATE:		BY:		\$31 FEE PAID:																	

DISTRIBUTION: COURT COPY ORDER RECEIPT ORDER COPY